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(Depositor's name)
(Signature)
(Date)

	•	TA TP	ACCIONATION					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTO	PRNEY DOCKET NO.	CONFIRMAT	CONFIRMATION NO.	
10/043,246	01/14/2002		Kouichi Takamin		<u> </u>	50023-162	942	2	
•		ME MANAGEMENT ME	THOD AND THE RE	CORD MEDIA	02/23/20	09 FNOIIAHH1 00000	1076 500417	10043246	
					01 FC:150 02 FC:150	01 1510.00 84 300.00	DA DA		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE PREV. PAI	D ISSUE FEE	TOTAL FEE(S) DUI	DATE DATE	DUE	
nonprovisional	NO	\$1510	\$300		\$0	\$1810	04/16	5/2009	
EXAM	MINER	ART UNIT	· CLASS-SUBCLASS						
ELISCA,	PIERRE E	3621	705-051000						
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			registered attorney or agent) and the names of up to						
PLEASE NOTE: Ur recordation as set for (A) NAME OF ASSI	nless an assignee is iden th in 37 CFR 3.11. Com IGNEE	A TO BE PRINTED ON tified below, no assignee pletion of this form is NO	data will appear on to T a substitute for film (B) RESIDENCE: (6)	he patent. If an g an assignment. CITY and STAT			document has b	een filed for	
	IC CORPORATION	r categories (will not be p		JAPAN Individual	Corpora	tion or other private g	roup entity 🔲	Government	
4a. The following fec(s) are submitted: **Extraction Fec **Publication Fec (No small entity discount permitted) **Extraction Fec (No small entity discount permitted)			b. Payment of Fec(s): A check is enclose Payment by cred The Director is heaverpayment, to	sed. it card. Form PT	O-2038 is att	ached.			
a. Applicant clair	atus (from status indicatens SMALL ENTITY stat	us. Sec 37 CFR 1.27.	☐ b. Applicant is no	o longer claiming	small en	ITITY status. See 37 (CFR 1.27(g)(2).		
NOTE: The Issue Fee an interest as shown by the	nd Publication Fee (if rec records of the United St	quired) will not be accepte ates Patent and Trademar	ed from anyone other t k Office.	han the applican	t; a registered	attorney or agent; or	the assignee or	other party in	
Authorized Signature	d0 00 x			Date _		February 2	20, 2009		
Typed or printed nan	nc / Stephen	A. Becker		Regist	ration No	26,527			

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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(Depositor's name)	
(Signature)	
(Date)	12-11-11-11-11-11-11-11-11-11-11-11-11-1

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/042 246	01/14/2002	Kouichi Takamine	50023-162	9422

TITLE OF INVENTION: IMAGE OUTPUT TIME MANAGEMENT METHOD AND THE RECORD MEDIA

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1510	\$300	\$0	\$1810	04/16/2009		
EXAM	MINER	ART UNIT	CLASS-SUBCLASS					
ELISCA,	PIERRE E	3621	705-051000					
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to					
(A) NAME OF ASS		•	e data will appear on the p OT a substitute for filing an (B) RESIDENCE: (CITY Osaka J	and STATE OR COUNT		ıment has been filed		
Please check the approp	oriate assignee category or	categories (will not be	printed on the patent):	Individual 🔁 Corporat	ion or other private group	entity Governm		
4a. The following fee(s) are submitted: State State			4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 5004/7 (enclose an extra copy of this form					
	atus (from status indicate			nger claiming SMALL EN				

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